

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

CHANGE OF CORRESPONDENCE ADDRESS Application Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Application Number	10/526,473
	Filing Date	March 3, 2005
	First Named Inventor	Fuminari OYAMA et al.
	Art Unit	1756
	Examiner Name	John L. GOODROW
	Attorney Docket Number	071856

Please change the Correspondence Address for the above-identified patent application to:

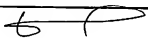
☒ CUSTOMER NUMBER 38834

<input type="checkbox"/>	Firm or Individual Name			
Address				
Address				
City		State	Zip	
Country				
Telephone		Fax		

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the:

- ☐ Applicant/Inventor
- ☐ Assignee of record of the entire interest
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)
- ☒ Attorney or Agent of record. Registration Number 32,861
- ☐ Registered practitioner named in the application transmittal letter in an application without an Executed oath or declaration. See 37 CFR 1.33(a). Registration Number _____

Type or Print Name	Ken-Ichi Hattori	
Signature		Telephone (202) 822-1100
Date	July 27, 2007	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.		
<input type="checkbox"/> *Total of <u>1</u> forms are submitted.		